

**PRIVACY RELEASE FORM
IMMIGRATION CASE**

Federal agencies are prohibited from releasing information concerning an individual to a third party under the Privacy Act of 1974. Please complete and sign this form, which will allow information regarding your immigration concern to be released to the office of Representative Chris Van Hollen.

PLEASE COMPLETE STEPS 1-6

STEP 1: PLEASE PROVIDE YOUR CONTACT INFORMATION

Name: Mr. _____
Ms. _____ First Name Last Name

Address: _____

Email Address: _____

Telephone Numbers: Home: _____
Work: _____
Mobile: _____

STEP 2: IF YOU ARE NOT THE APPLICANT, PLEASE DESCRIBE YOUR RELATIONSHIP TO THE APPLICANT (examples: if you are filing for your sibling, spouse, parent, or child)

STEP 3: PLEASE STATE THE IMMIGRATION ISSUE ON WHICH YOU WOULD LIKE ASSISTANCE (examples: I-130, application for naturalization, non-immigrant visitor visa)

STEP 4: THIS SECTION MUST BE COMPLETED BY THE PETITIONER OR BENEFICIARY

Please Circle One: **PETITIONER** **BENEFICIARY**

Name: Mr. _____
Ms. _____ First Name Last Name

Date of Birth: _____

Alien Number: _____

Country of Citizenship: _____

Country of Origin: _____

I authorize the Office of Congressman Chris Van Hollen to make inquiries on my behalf:

Signature

Date

STEP 5: PLEASE ATTACH A SHORT LETTER EXPLAINING THE MATTER ON WHICH YOU WOULD LIKE ASSISTANCE AND COPIES OF ANY RELEVANT DOCUMENTS OR NOTICES (examples: approval notice, request for evidence, denial letter)

STEP 6: PLEASE RETURN THIS SIGNED FORM AND ALL SUPPORTING MATERIAL TO:
51 Monroe Street, Suite 507, Rockville MD 20850
FAX: 301-424-5992